Table 3.1 Inpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (1 of 4)

		Medicare Supplemental Health Insurance							
Beneficiary		Fee-for-Service		Individually Purchased	Employer-Sponsored	Both Types of	Medicare		
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²		
			Percen	t of Beneficiaries with at Least	One Inpatient Hospital Stay				
All Beneficiaries	18.27	16.39	25.41	18.12	17.17	18.10	14.05		
	0.46	1.07	1.09	0.63	0.76	1.75	1.67		
Medicare Status ³ Aged									
65 - 74 years	14.97	12.45	22.59	14.96	14.12	15.83	12.99		
	0.60	1.42	2.14	0.96	0.95	2.47	2.11		
75 - 84 years	21.48	23.56	29.38	20.63	21.19	19.94	15.66		
	0.81	2.67	2.18	1.09	1.17	3.22	2.55		
85 years and older	27.89	24.08	33.48	26.80	30.07	26.51	16.71		
	1.23	4.04	3.22	1.82	2.33	5.34	5.00		
Disabled									
Under 45 years	17.39	12.93	20.37	20.19	10.75	100.00	33.74		
	1.56	2.68	2.39	12.63	2.81	0.00	20.50		
45 - 64 years	20.32	17.35	26.67	19.01	18.87	13.79	8.17		
	1.47	3.10	2.74	4.61	2.62	8.47	4.95		
Gender									
Male	18.57	17.23	23.61	19.60	17.37	17.26	16.71		
	0.62	1.40	1.77	1.14	0.98	2.67	2.29		
Female	18.03	15.27	26.51	17.21	17.00	18.79	11.80		
	0.55	1.78	1.41	0.91	0.98	2.45	1.90		
Living Arrangement									
Alone	18.95	18.33	23.10	18.17	16.83	25.09	16.83		
	0.92	2.65	1.81	1.21	1.79	4.05	3.24		
With spouse	16.77	14.22	27.82	17.21	16.68	14.04	12.68		
	0.57	1.33	2.52	0.92	0.86	1.93	1.69		
With children	22.07	16.91	29.46	22.49	18.48	25.02	12.36		
	1.11	2.87	2.44	2.40	2.22	6.97	3.80		
With others	21.94	20.65	21.49	21.16	24.22	28.68	20.88		
	1.40	3.54	2.16	2.79	3.81	10.17	7.06		

Table 3.1 Inpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (2 of 4)

		Medicare		Suppleme	ntal Health Insurance		
Beneficiary Characteristic	Total	Fee-for-Service Only	Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	Medicare HMO ²
			Percer	nt of Beneficiaries with at Least	One Inpatient Hospital Stay		-
All Beneficiaries	18.27	16.39	25.41	18.12	17.17	18.10	14.05
	0.46	1.07	1.09	0.63	0.76	1.75	1.67
Race/Ethnicity							
White non-Hispanic	18.10	16.72	26.49	18.22	17.10	18.68	14.63
	0.45	1.44	1.67	0.64	0.80	1.91	1.75
Black non-Hispanic	21.14	19.48	27.49	10.10	20.99	6.33	12.04
•	1.35	2.59	1.99	3.43	3.21	4.31	3.81
Hispanic	16.45	7.71	21.45	22.59	14.82	11.28	8.07
·	2.20	1.98	3.52	6.35	4.90	12.19	5.29
Other	13.98	15.57	17.00	14.56	7.43	36.86	9.93
	2.63	6.60	4.77	6.75	4.63	28.46	6.22
ncome							
Less than \$2,500	20.84	10.32	31.07	18.38	25.80	11.35	17.38
2000 παι φ2,000	2.53	4.09	7.47	5.00	6.70	15.54	8.85
\$2,500 - \$4,999	21.05	15.44	22.39	21.52	23.44	33.86	12.37
+- , + -,	2.00	6.24	3.20	5.76	6.87	21.96	11.75
\$5,000 - \$7,499	21.27	16.69	23.90	19.58	18.08	26.76	14.62
******	1.11	2.27	1.49	2.66	3.50	17.32	5.12
\$7,500 - \$9,999	20.95	16.40	30.09	19.69	19.56	20.77	15.78
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1.22	2.45	2.51	2.10	2.34	8.32	5.73
\$10,000 - \$14,999	20.08	18.91	24.36	18.05	22.30	22.37	17.09
	1.02	2.40	3.76	1.30	2.15	3.83	3.63
\$15,000 - \$19,999	16.87	13.29	19.73	17.32	18.14	20.31	10.69
	1.12	2.82	8.74	1.90	1.58	5.17	3.08
\$20,000 - \$24,999	16.69	14.99	33.13	17.27	15.93	13.84	20.37
	1.18	3.95	12.06	1.88	1.75	3.91	4.30
\$25,000 - \$29,999	15.37	8.69	21.33	18.43	15.95	15.75	7.30
	1.39	4.21	14.21	2.28	2.36	4.95	3.98
\$30,000 or more	15.08	20.56	40.34	17.16	13.69	16.50	11.07
	0.90	4.20	15.62	1.74	1.35	3.19	3.01

Table 3.1 Inpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (3 of 4)

		Medicare		Suppleme	ntal Health Insurance				
Beneficiary Characteristic	Total	Fee-for-Service Only	Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	Medicare HMO ²		
	Percent of Beneficiaries with at Least One Inpatient Hospital Stay								
All Beneficiaries	18.27	16.39	25.41	18.12	17.17	18.10	14.05		
	0.46	1.07	1.09	0.63	0.76	1.75	1.67		
Health Status									
Excellent	8.38	5.75	17.47	9.06	8.25	4.56	5.26		
	0.83	1.98	3.05	1.31	1.28	1.97	1.68		
Very good	11.54	10.59	17.23	11.84	11.08	10.91	8.99		
	0.75	1.78	2.78	1.28	1.22	2.43	1.90		
Good	17.28	16.40	19.09	17.91	16.48	18.35	15.85		
	0.64	1.94	1.84	1.23	1.25	3.10	3.13		
Fair	28.23	20.38	29.41	29.78	29.27	36.51	26.96		
	0.97	2.61	2.13	2.05	2.19	7.06	4.70		
Poor	39.16	28.17	38.76	44.28	42.24	47.45	40.82		
	1.84	3.33	3.45	4.02	3.73	11.19	9.39		
Functional Limitation									
None	11.27	9.10	18.08	11.53	10.47	11.61	9.80		
	0.46	1.14	1.76	0.78	0.84	2.08	1.83		
IADL only ⁴	23.47	21.07	25.75	24.78	23.87	21.73	16.94		
	0.92	2.31	2.00	1.66	1.63	4.24	3.46		
One to two ADLs ⁵	25.29	20.70	24.17	26.87	25.14	32.48	26.69		
	1.28	3.29	2.85	2.32	1.89	6.76	5.51		
Three to five ADLs	43.68	37.30	44.04	41.82	49.59	45.68	33.70		
	1.89	4.10	3.33	3.54	4.00	10.70	7.46		

Table 3.1 Inpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (4 of 4)

	Medicare Supplemental Health Insurance						
Beneficiary Characteristic	Total	Fee-for-Service Only	Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	Medicare HMO ²
			Percen	nt of Beneficiaries with at Least	One Inpatient Hospital Stay		
All Beneficiaries	18.27	16.39	25.41	18.12	17.17	18.10	14.05
	0.46	1.07	1.09	0.63	0.76	1.75	1.67
Metropolitan Area Residen	t						
Yes	18.17	15.87	24.62	19.00	17.01	18.76	14.09
	0.54	1.42	1.28	0.81	0.91	1.99	1.66
No	18.63	17.68	27.40	16.40	17.92	15.76	13.29
	0.78	1.65	1.84	0.89	1.27	4.09	10.28

Source: Medicare Current Beneficiary Survey, CY 1994 Cost and Use Public-Use File.

The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.

² HMO stands for Health Maintenance Organization.

³ Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of aged and disabled.

⁴ IADL stands for Instrumental Activity of Daily Living.

⁵ ADL stands for Activity of Daily Living.

Table 3.2 Outpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (1 of 4)

		Medicare						
Beneficiary		Fee-for-Service		Individually Purchased	Employer-Sponsored	Both Types of	Medicare	
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²	
			Percent	of Beneficiaries with at Least	One Outpatient Hospital Visit		'	
All Beneficiaries	60.89	51.94	68.27	62.54	59.59	63.02	59.94	
	0.61	1.32	1.21	1.04	0.95	2.56	2.08	
Medicare Status ³ Aged								
65 - 74 years	58.00	49.13	65.74	59.58	56.86	61.94	57.83	
	0.85	2.38	2.51	1.44	1.30	3.87	2.97	
75 - 84 years	65.35	55.89	68.56	66.81	66.27	61.48	63.95	
	0.86	3.26	2.95	1.28	1.35	3.72	2.92	
85 years and older	59.09	36.93	65.47	63.14	56.77	69.52	56.81	
	1.36	3.66	3.30	2.17	2.95	5.67	6.31	
Disabled								
Under 45 years	63.70	55.65	69.66	44.38	59.18	45.07	46.34	
	1.77	4.19	2.21	9.86	5.04	34.95	20.75	
45 - 64 years	65.19	59.01	74.07	70.28	59.59	83.50	62.09	
	1.65	3.18	2.95	5.40	3.30	8.49	9.99	
Gender								
Male	59.15	53.99	63.37	63.15	57.51	58.86	58.00	
	0.68	1.90	2.01	1.64	1.13	3.62	3.21	
Female	62.26	49.22	71.26	62.17	61.39	66.48	61.58	
	0.81	2.13	1.53	1.30	1.49	3.35	2.66	
Living Arrangement								
Alone	60.77	52.10	68.35	59.48	61.44	62.29	58.82	
	1.03	3.29	2.27	1.86	2.20	4.74	4.00	
With spouse	60.42	50.45	68.91	63.94	58.70	62.83	61.11	
	0.81	2.31	2.34	1.34	1.19	3.27	3.19	
With children	64.46	57.74	71.77	63.05	62.89	70.57	56.09	
	1.66	4.32	2.36	3.50	3.86	9.15	4.96	
With others	60.11	51.73	63.89	61.89	60.07	61.79	57.81	
	1.79	3.65	2.49	3.53	4.48	9.19	8.38	

Table 3.2 Outpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (2 of 4)

		Medicare		Suppleme	ental Health Insurance		
Beneficiary		Fee-for-Service		Individually Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
			Percent	of Beneficiaries with at Least	One Outpatient Hospital Visit		
All Beneficiaries	60.89	51.94	68.27	62.54	59.59	63.02	59.94
	0.61	1.32	1.21	1.04	0.95	2.56	2.08
Race/Ethnicity							
White non-Hispanic	61.33	51.98	70.63	62.36	60.02	64.22	63.03
	0.66	1.80	1.49	1.03	1.03	2.68	2.34
Black non-Hispanic	58.99	53.91	66.99	58.25	59.89	44.79	38.31
·	1.51	2.44	2.19	5.59	3.80	12.30	8.05
Hispanic	59.39	49.93	65.82	75.17	51.75	43.98	48.54
	2.07	4.94	3.15	4.85	5.70	18.98	8.85
Other	53.66	45.15	59.16	65.77	38.67	82.69	57.77
	4.68	10.06	6.56	11.68	8.85	16.92	12.30
ncome							
Less than \$2,500	58.24	59.75	63.12	54.70	49.76	88.65	73.31
2000 than \$2,000	3.79	6.66	8.03	8.10	8.68	15.54	10.53
\$2,500 - \$4,999	53.49	42.83	59.11	53.27	55.54	62.90	30.99
Ψ=,000 Ψ 1,000	2.62	6.44	4.15	6.63	8.63	21.89	13.40
\$5,000 - \$7,499	60.48	43.85	66.45	58.82	59.82	36.76	56.16
40,000 41,100	1.20	3.08	1.72	3.26	5.88	18.75	8.65
\$7,500 - \$9,999	61.21	54.38	76.36	58.89	60.35	55.64	49.70
* 7	1.44	3.40	2.33	2.42	3.36	10.75	5.20
\$10,000 - \$14,999	63.71	51.43	75.43	65.99	62.90	74.43	65.77
, ., , ,	1.48	3.46	3.59	2.12	2.47	5.70	3.53
\$15,000 - \$19,999	62.12	57.91	83.65	60.22	62.40	78.02	59.97
	1.45	4.87	8.52	2.38	1.93	4.87	5.30
\$20,000 - \$24,999	59.22	50.27	60.72	64.35	59.29	53.10	53.75
	1.55	6.55	12.45	2.44	2.35	6.47	5.65
\$25,000 - \$29,999	59.46	44.47	52.35	66.49	58.86	55.98	55.42
	2.48	8.61	19.76	3.73	3.67	7.28	6.28
\$30,000 or more	60.32	66.50	36.50	63.85	57.36	59.65	66.56
	1.33	6.15	12.71	2.55	1.73	4.45	4.81

Table 3.2 Outpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (3 of 4)

		Medicare		Suppleme	ental Health Insurance		
Beneficiary		Fee-for-Service		Individually Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
			Percent	of Beneficiaries with at Least	One Outpatient Hospital Visit		
All Beneficiaries	60.89	51.94	68.27	62.54	59.59	63.02	59.94
	0.61	1.32	1.21	1.04	0.95	2.56	2.08
Health Status							
Excellent	49.14	35.30	51.77	49.94	50.90	47.92	52.55
	1.22	4.14	4.31	2.56	2.01	5.32	4.53
Very good	55.71	50.24	55.39	57.85	55.40	54.97	56.14
	1.10	3.41	3.70	1.84	1.81	4.57	4.71
Good	62.03	50.03	62.99	66.62	60.45	71.01	61.20
	1.16	3.35	2.31	1.63	1.92	4.13	3.42
Fair	70.73	59.29	78.09	73.30	68.76	71.29	69.85
	1.20	2.91	1.97	1.87	2.45	6.08	4.46
Poor	73.26	62.03	77.64	70.86	75.91	83.69	83.25
	1.56	3.73	2.63	3.61	3.20	6.91	7.27
Functional Limitation							
None	55.74	47.17	59.78	57.80	54.98	59.39	56.31
	0.71	2.13	2.24	1.32	1.13	3.51	2.66
IADL only ⁴	65.84	55.84	70.89	69.19	64.82	65.16	63.90
	1.09	3.09	2.07	1.92	1.92	4.81	3.96
One to two ADLs ⁵	68.84	57.03	71.96	69.60	69.90	72.08	72.63
	1.43	3.80	2.67	2.26	2.43	5.86	5.25
Three to five ADLs	71.00	58.99	78.35	71.85	70.10	74.75	64.57
	1.80	4.55	2.45	3.93	3.67	9.34	8.86

Table 3.2 Outpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (4 of 4)

		Medicare		Suppleme			
Beneficiary Characteristic		Fee-for-Service		Individually Purchased	Employer-Sponsored	Both Types of	Medicare
	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
			Percent	of Beneficiaries with at Least	One Outpatient Hospital Visit		
All Beneficiaries	60.89	51.94	68.27	62.54	59.59	63.02	59.94
	0.61	1.32	1.21	1.04	0.95	2.56	2.08
Metropolitan Area Residen	t						
Yes	59.86	50.65	68.50	60.99	58.84	61.66	58.89
	0.73	1.63	1.36	1.32	1.11	2.95	2.14
No	63.98	55.20	67.59	65.56	62.87	67.82	77.60
	1.06	1.84	2.72	1.81	1.62	5.54	9.13

Source: Medicare Current Beneficiary Survey, CY 1994 Cost and Use Public-Use File.

¹ The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.

² HMO stands for Health Maintenance Organization.

³ Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of aged and disabled.

⁴ IADL stands for Instrumental Activity of Daily Living.

⁵ ADL stands for Activity of Daily Living.

Table 3.3 Physician/Supplier Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (1 of 4)

		Medicare		Suppleme	ental Health Insurance		
Beneficiary		Fee-for-Service		Individually Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
			Percent of	of Beneficiaries with at Least C	ne Physician/Supplier Service		
All Beneficiaries	93.13	83.84	92.07	94.53	94.90	97.63	93.62
	0.28	1.12	0.91	0.47	0.39	0.98	1.00
Medicare Status ³							
Aged							
65 - 74 years	91.72	81.00	89.37	92.74	93.46	98.40	92.41
	0.45	1.92	2.01	0.81	0.59	1.04	1.47
75 - 84 years	96.15	89.40	96.12	96.80	97.38	96.05	95.72
	0.36	1.95	1.08	0.45	0.53	1.89	1.12
85 years and older	95.89	86.57	95.69	97.53	97.86	97.49	93.18
	0.47	2.50	1.20	0.72	0.74	1.83	2.97
Disabled							
Under 45 years	87.57	79.09	90.98	90.61	88.87	100.00	69.67
	1.41	3.82	1.69	6.68	3.07	0.00	19.70
45 - 64 years	91.77	86.14	91.65	91.61	96.93	100.00	96.85
	0.88	2.12	1.87	3.57	1.63	0.00	2.91
Gender							
Male	91.64	82.56	89.32	93.36	94.33	97.83	91.30
	0.42	1.48	1.50	0.82	0.63	1.00	1.66
Female	94.31	85.52	93.74	95.25	95.39	97.46	95.58
	0.42	1.94	1.02	0.58	0.60	1.56	1.23
Living Arrangement							
Alone	93.02	82.78	92.78	95.10	94.29	94.81	95.24
	0.63	2.65	1.44	0.69	0.84	3.28	1.55
With spouse	93.98	84.40	92.27	94.74	95.79	98.52	92.71
	0.39	1.76	1.99	0.62	0.51	0.66	1.50
With children	91.60	84.25	92.77	92.68	92.36	97.48	94.12
	0.94	3.35	1.56	1.97	1.95	2.28	2.51
With others	89.49	83.19	90.07	92.38	87.68	100.00	96.54
							1.94
	1.01	3.30	1.65	2.07	3.22	0.00	

Table 3.3 Physician/Supplier Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (2 of 4)

		Medicare		Suppleme	ntal Health Insurance		
Beneficiary		Fee-for-Service		Individually Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
			Percent of	of Beneficiaries with at Least O	ne Physician/Supplier Service		
All Beneficiaries	93.13	83.84	92.07	94.53	94.90	97.63	93.62
	0.28	1.12	0.91	0.47	0.39	0.98	1.00
Race/Ethnicity							
White non-Hispanic	94.00	85.80	92.25	94.75	95.16	98.11	94.67
	0.27	1.15	1.29	0.48	0.42	0.73	0.85
Black non-Hispanic	88.50	84.14	90.25	86.23	92.57	100.00	82.32
	1.07	2.29	1.50	4.04	2.27	0.00	6.81
Hispanic	89.37	73.83	93.19	97.50	91.81	74.86	92.24
	1.48	4.54	2.33	2.49	2.65	21.05	4.53
Other	90.56	71.19	94.57	96.83	92.01	91.26	98.10
	2.68	10.95	3.10	2.92	5.73	11.85	2.15
Income							
Less than \$2,500	88.19	83.99	92.02	75.33	97.02	100.00	100.00
2000 11011 \$2,000	2.19	4.93	3.61	5.76	1.93	0.00	0.00
\$2,500 - \$4,999	90.66	74.59	92.18	94.58	95.15	100.00	94.94
φ2,000 ψ1,000	1.81	6.84	2.09	3.40	4.87	0.00	5.14
\$5,000 - \$7,499	90.47	80.06	91.43	95.57	93.95	100.00	93.75
φο,σσο φτ,τοσ	0.88	2.85	1.23	1.24	2.75	0.00	3.39
\$7,500 - \$9,999	92.16	87.70	94.34	93.67	91.44	88.17	93.61
φτ,σσσ φσ,σσσ	0.82	2.59	1.77	1.40	2.30	8.70	1.47
\$10,000 - \$14,999	92.39	81.99	92.15	94.50	94.09	94.89	97.62
ψ.ο,οοο ψ.ι,οοο	0.73	2.50	2.53	1.16	1.12	2.72	1.07
\$15,000 - \$19,999	94.89	88.57	97.73	95.95	95.86	98.91	90.47
* 1.5,555 * 1.5,555	0.66	3.21	2.08	0.87	0.90	1.16	3.01
\$20,000 - \$24,999	94.53	84.82	94.28	95.68	95.34	98.90	92.22
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.73	5.14	5.80	1.12	0.92	0.84	3.98
\$25,000 - \$29,999	93.72	77.14	100.00	97.16	93.81	100.00	90.54
, -, , ,	1.26	7.53	0.00	1.61	1.94	0.00	4.56
\$30,000 or more	94.95	90.93	75.67	94.17	95.68	98.55	93.38
, , , , , , , , , , , , , , , , , , , ,	0.53	3.66	14.89	1.22	0.76	0.80	1.96

Table 3.3 Physician/Supplier Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (3 of 4)

		Medicare		Suppleme	ntal Health Insurance				
Beneficiary Characteristic	Total	Fee-for-Service Only	Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	Medicare HMO ²		
	Percent of Beneficiaries with at Least One Physician/Supplier Service								
All Beneficiaries	93.13	83.84	92.07	94.53	94.90	97.63	93.62		
	0.28	1.12	0.91	0.47	0.39	0.98	1.00		
Health Status									
Excellent	87.07	69.14	79.84	87.39	91.43	94.12	88.80		
	0.87	3.71	3.52	1.74	1.21	2.94	3.18		
Very good	92.44	83.68	87.86	94.09	93.20	98.63	92.67		
	0.53	2.14	3.03	0.83	0.89	1.02	2.12		
Good	94.25	84.40	90.91	96.21	96.41	97.24	95.85		
	0.45	2.04	1.69	0.72	0.74	1.70	1.35		
Fair	96.13	89.57	95.26	98.59	97.53	100.00	96.75		
	0.47	1.85	1.11	0.56	0.83	0.00	1.43		
Poor	96.09	87.33	97.31	98.46	98.47	100.00	98.41		
	0.75	3.04	1.22	0.79	0.90	0.00	1.61		
Functional Limitation									
None	91.22	78.37	87.77	92.46	93.70	97.82	91.45		
	0.45	1.96	1.58	0.78	0.58	1.01	1.52		
IADL only ⁴	95.00	87.46	92.90	97.62	96.77	95.89	97.70		
	0.50	1.91	1.30	0.73	0.80	2.49	1.04		
One to two ADLs ⁵	96.15	93.56	94.33	96.90	96.75	100.00	98.27		
	0.60	1.85	2.26	0.94	1.05	0.00	0.85		
Three to five ADLs	96.61	88.40	97.49	99.45	97.75	96.95	94.99		
	0.75	3.50	1.14	0.50	1.47	2.72	3.50		

Table 3.3 Physician/Supplier Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (4 of 4)

	Medicare Supplemental Health Insurance						
Beneficiary Characteristic	Total	Fee-for-Service Only	Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	Medicare HMO ²
			Percent of	of Beneficiaries with at Least O	ne Physician/Supplier Service		
All Beneficiaries	93.13	83.84	92.07	94.53	94.90	97.63	93.62
	0.28	1.12	0.91	0.47	0.39	0.98	1.00
Metropolitan Area Reside	nt						
Yes	93.29	82.98	92.85	94.82	95.00	97.30	93.24
	0.30	1.23	0.95	0.58	0.42	1.17	1.05
No	92.79	85.65	90.69	93.97	94.74	98.79	100.00
	0.53	2.29	1.61	0.74	0.96	0.95	0.00

Source: Medicare Current Beneficiary Survey, CY 1994 Cost and Use Public-Use File.

¹ The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.

² HMO stands for Health Maintenance Organization.

³ Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of aged and disabled.

⁴ IADL stands for Instrumental Activity of Daily Living.

⁵ ADL stands for Activity of Daily Living.

Table 3.4 Dental Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (1 of 4)

		Medicare		Suppleme	ntal Health Insurance		
Beneficiary		Fee-for-Service		Individually Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
			Pe	rcent of Beneficiaries with at L	east One Dental Service		
All Beneficiaries	39.15	20.61	19.93	42.91	47.60	52.25	42.56
	0.71	1.16	1.23	1.03	1.09	2.95	2.04
Medicare Status ³							
Aged							
65 - 74 years	43.01	20.48	21.08	46.32	50.73	52.56	43.92
	1.04	2.14	2.43	1.53	1.41	4.31	2.52
75 - 84 years	37.86	18.95	14.42	40.28	45.17	49.57	40.70
	0.89	2.68	1.52	1.48	1.56	3.68	3.39
85 years and older	28.10	10.06	9.49	31.99	34.23	56.22	38.31
	1.27	2.33	2.13	1.83	3.12	6.72	6.48
Disabled							
Under 45 years	33.48	27.10	32.00	51.65	46.94	100.00	14.07
	2.04	3.72	2.38	12.68	6.02	0.00	14.65
45 - 64 years	30.35	23.99	19.09	45.40	40.18	61.61	49.63
	1.63	2.65	2.27	5.62	3.95	11.34	11.00
Gender							
Male	37.77	19.58	19.27	40.57	46.61	47.93	45.43
	0.91	1.54	1.55	1.63	1.54	3.85	3.37
Female	40.23	21.97	20.34	44.36	48.46	55.83	40.13
	0.88	2.01	1.70	1.33	1.30	3.58	2.24
Living Arrangement							
Alone	36.55	22.69	18.32	39.97	46.16	52.52	42.04
	1.16	2.85	1.83	1.92	2.00	5.03	4.74
With spouse	43.96	20.71	19.62	46.49	50.04	52.79	46.34
·	0.90	1.58	2.47	1.51	1.21	3.60	2.72
With children	24.40	13.98	15.38	31.55	32.22	39.55	28.97
	1.36	2.68	1.99	2.87	3.41	10.27	5.31
With others	31.57	22.87	27.40	35.88	41.36	56.24	26.83
	1.54	3.04	2.18	3.09	4.58	10.70	7.22
		0.0.	2			70	

Table 3.4 Dental Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (2 of 4)

	Medicare		Suppleme	ental Health Insurance		
	Fee-for-Service		Individually Purchased	Employer-Sponsored	Both Types of	Medicare
Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
		Pe	rcent of Beneficiaries with at L	east One Dental Service		
39.15	20.61	19.93	42.91	47.60	52.25	42.56
0.71	1.16	1.23	1.03	1.09	2.95	2.04
42.52	22.95	21.67	43.47	49.05	54.18	46.57
0.81	1.50	1.53	1.09	1.13	3.09	2.44
19.41	13.58	14.24	30.34	31.30	17.87	21.63
1.28	2.38	1.49	5.38	3.91	7.76	6.75
26.55	18.71	23.24	36.51	38.43	29.03	27.61
3.15	3.53	4.67	8.50	5.13	15.16	8.14
29.74	22.75	18.50	40.58	39.53	91.26	30.42
4.13	7.76	5.67	10.24	12.24	11.85	10.20
26.47	16.70	28.17	20.15	40.02	62.51	17.11
						8.34
						10.35
						7.71
		18.48				18.80
		1.57		4.95		5.90
				28.32		26.34
1.23		2.40	1.82	2.50		5.65
32.02	15.92	25.42	35.58	35.58	41.40	38.16
1.24	1.71	4.01	1.87	2.25	5.45	4.71
38.34	22.67	36.19	41.46	38.61	42.37	40.41
1.63	4.20	19.67	2.68	2.65	6.66	5.59
46.55	28.21	32.70	52.43	46.17	51.45	42.31
1.64	4.85	13.74	2.69	2.35	6.47	5.92
47.88	35.38	10.73	52.99	47.94	46.41	46.41
2.14	8.02	10.72	3.47	3.26	7.64	6.48
63.53	40.16	3.45	65.61	64.48	67.78	64.06
1.27	5.02	5.41	2.22	1.95	4.11	3.77
	39.15 0.71 42.52 0.81 19.41 1.28 26.55 3.15 29.74 4.13 26.47 2.94 22.70 2.27 19.57 1.17 24.95 1.23 32.02 1.24 38.34 1.63 46.55 1.64 47.88 2.14 63.53	Total Service Only 39.15	Total Fee-for-Service Medicaid Pe 39.15 20.61 19.93 0.71 1.16 1.23 42.52 22.95 21.67 0.81 1.50 1.53 19.41 13.58 14.24 1.28 2.38 1.49 26.55 18.71 23.24 3.15 3.53 4.67 29.74 22.75 18.50 4.13 7.76 5.67 26.47 16.70 28.17 2.94 5.30 6.60 22.70 17.25 17.46 2.27 6.87 3.23 19.57 13.75 18.48 1.17 2.29 1.57 24.95 20.17 20.78 1.23 3.04 2.40 32.02 15.92 25.42 1.24 1.71 4.01 38.34 22.67 36.19 1.63 4.20 19.67 <td>Total Fee-for-Service Only Medicaid Individually Purchased Private Insurance Percent of Beneficiaries with at L 39.15 39.15 20.61 19.93 42.91 0.71 1.16 1.23 1.03 42.52 22.95 21.67 43.47 0.81 1.50 1.53 1.09 19.41 13.58 14.24 30.34 1.28 2.38 1.49 5.38 26.55 18.71 23.24 36.51 3.15 3.53 4.67 8.50 29.74 22.75 18.50 40.58 4.13 7.76 5.67 10.24 26.47 16.70 28.17 20.15 2.94 5.30 6.60 4.96 22.70 17.25 17.46 27.22 2.27 6.87 3.23 5.97 19.57 13.75 18.48 21.92 1.17 2.29 1.57 2.69 24.95 20</td> <td> Fee-for-Service</td> <td>Total Fee-for-Service Only Individually Purchased Private Insurance Employer-Sponsored Private Insurance Both Types of Private Insurance 39.15 20.61 19.93 42.91 47.60 52.25 0.71 1.16 1.23 1.03 1.09 2.95 42.52 22.95 21.67 43.47 49.05 54.18 0.81 1.50 1.53 1.09 1.13 3.09 19.41 13.58 14.24 30.34 31.30 17.87 1.28 2.38 1.49 5.38 3.91 7.76 26.55 18.71 23.24 36.51 38.43 29.03 3.15 3.53 4.67 8.50 5.13 15.16 29.74 22.75 18.50 40.58 39.53 91.26 4.13 7.76 5.67 10.24 12.24 11.85 26.47 16.70 28.17 20.15 40.02 62.51 2.94 5.30 6.60 4.96</td>	Total Fee-for-Service Only Medicaid Individually Purchased Private Insurance Percent of Beneficiaries with at L 39.15 39.15 20.61 19.93 42.91 0.71 1.16 1.23 1.03 42.52 22.95 21.67 43.47 0.81 1.50 1.53 1.09 19.41 13.58 14.24 30.34 1.28 2.38 1.49 5.38 26.55 18.71 23.24 36.51 3.15 3.53 4.67 8.50 29.74 22.75 18.50 40.58 4.13 7.76 5.67 10.24 26.47 16.70 28.17 20.15 2.94 5.30 6.60 4.96 22.70 17.25 17.46 27.22 2.27 6.87 3.23 5.97 19.57 13.75 18.48 21.92 1.17 2.29 1.57 2.69 24.95 20	Fee-for-Service	Total Fee-for-Service Only Individually Purchased Private Insurance Employer-Sponsored Private Insurance Both Types of Private Insurance 39.15 20.61 19.93 42.91 47.60 52.25 0.71 1.16 1.23 1.03 1.09 2.95 42.52 22.95 21.67 43.47 49.05 54.18 0.81 1.50 1.53 1.09 1.13 3.09 19.41 13.58 14.24 30.34 31.30 17.87 1.28 2.38 1.49 5.38 3.91 7.76 26.55 18.71 23.24 36.51 38.43 29.03 3.15 3.53 4.67 8.50 5.13 15.16 29.74 22.75 18.50 40.58 39.53 91.26 4.13 7.76 5.67 10.24 12.24 11.85 26.47 16.70 28.17 20.15 40.02 62.51 2.94 5.30 6.60 4.96

Table 3.4 Dental Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (3 of 4)

	'	Medicare		Suppleme	ental Health Insurance		
Beneficiary Characteristic	Total	Fee-for-Service Only	Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	Medicare HMO ²
			Pe	rcent of Beneficiaries with at L	east One Dental Service		
All Beneficiaries	39.15	20.61	19.93	42.91	47.60	52.25	42.56
	0.71	1.16	1.23	1.03	1.09	2.95	2.04
Health Status							
Excellent	47.78	21.16	19.23	46.60	58.97	59.23	50.22
	1.59	3.24	3.50	2.28	2.27	5.34	4.43
Very good	47.63	28.92	23.58	52.48	52.26	63.12	41.22
	1.15	3.68	3.15	1.81	1.88	4.97	3.70
Good	38.24	18.98	21.78	41.58	45.92	45.93	43.81
	1.03	1.98	2.25	1.61	1.90	4.35	4.15
Fair	28.83	19.88	18.96	32.27	35.59	42.00	34.37
	1.20	2.53	2.08	2.56	2.63	6.98	5.47
Poor	22.69	13.10	15.92	24.16	32.48	40.68	29.75
	1.53	2.42	2.39	3.62	2.89	8.58	8.90
Functional Limitation							
None	44.86	21.65	21.10	48.40	52.64	52.69	45.59
	0.92	1.95	2.30	1.41	1.24	3.62	2.40
IADL only ⁴	34.48	24.25	20.29	38.11	40.52	55.79	39.29
	1.29	2.60	1.72	2.09	2.73	4.52	4.03
One to two ADLs ⁵	31.43	16.63	21.15	33.04	39.68	45.70	36.96
	1.48	2.63	2.81	2.60	2.57	6.43	5.50
Three to five ADLs	23.55	10.76	14.82	26.11	33.18	50.52	26.23
	1.66	2.56	2.89	3.49	3.63	10.43	8.29

Table 3.4 Dental Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (4 of 4)

		Medicare		Suppleme	ntal Health Insurance		
Beneficiary Characteristic	Total	Fee-for-Service Only	Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	Medicare HMO ²
			Pe	rcent of Beneficiaries with at L	east One Dental Service		
All Beneficiaries	39.15	20.61	19.93	42.91	47.60	52.25	42.56
	0.71	1.16	1.23	1.03	1.09	2.95	2.04
Metropolitan Area Resident							
Yes	40.97	20.86	21.67	44.71	48.92	53.44	43.67
	0.80	1.49	1.42	1.28	1.16	3.36	2.11
No	33.77	19.47	15.94	39.42	42.18	48.05	23.83
	1.37	2.18	2.28	1.88	2.51	5.56	5.98

Source: Medicare Current Beneficiary Survey, CY 1994 Cost and Use Public-Use File.

¹ The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.

² HMO stands for Health Maintenance Organization.

³ Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of aged and disabled.

⁴ IADL stands for Instrumental Activity of Daily Living.

⁵ ADL stands for Activity of Daily Living.

Table 3.5 Prescription Medicine User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (1 of 4)

		Medicare		Suppleme	ntal Health Insurance		
Beneficiary Characteristic	Total	Fee-for-Service Only	Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	Medicare HMO ²
			Perce	ent of Beneficiaries with at Leas	st One Prescribed Medicine		
All Beneficiaries	85.28	74.20	87.61	86.49	85.66	91.79	88.09
	0.41	1.59	0.93	0.77	0.70	1.54	1.40
Medicare Status ³ Aged							
65 - 74 years	83.85	71.06	86.91	83.85	84.74	92.67	87.26
	0.63	2.74	2.08	1.25	1.08	1.89	1.85
75 - 84 years	87.93	75.46	92.26	89.68	86.87	90.60	90.01
	0.53	2.66	1.38	0.92	1.04	2.46	1.86
85 years and older	87.16	76.01	88.69	88.99	87.86	88.83	87.19
	0.86	3.93	2.41	1.42	1.64	4.23	4.06
Disabled							
Under 45 years	79.77	72.56	82.71	75.43	81.24	100.00	78.36
	1.69	4.34	1.84	9.89	3.56	0.00	18.24
45 - 64 years	86.37	81.13	87.06	93.03	88.60	96.00	84.96
	1.39	2.91	2.65	2.97	2.94	4.01	8.94
Gender							
Male	82.41	72.84	80.04	83.08	84.44	92.92	86.65
	0.56	1.71	1.77	1.22	1.07	1.85	1.87
Female	87.54	76.00	92.22	88.58	86.73	90.86	89.30
	0.54	2.40	1.03	0.93	0.94	2.25	1.81
Living Arrangement							
Alone	85.30	70.43	90.00	87.22	85.66	88.66	86.03
	0.86	3.20	1.52	1.22	1.59	3.62	2.56
With spouse	85.44	75.76	85.87	85.81	86.01	92.75	88.35
	0.50	2.12	1.95	1.08	0.88	1.59	1.95
With children	86.01	73.97	90.96	88.04	84.19	94.00	87.80
	1.21	4.77	1.40	1.98	2.40	3.64	3.44
With others	83.28	75.18	82.94	87.76	82.78	92.61	92.95
	1.16	3.64	2.03	2.57	2.69	5.71	3.37

Table 3.5 Prescription Medicine User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (2 of 4)

		Medicare		Suppleme	ntal Health Insurance		
Beneficiary		Fee-for-Service		Individually Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
			Perce	nt of Beneficiaries with at Leas	st One Prescribed Medicine		
All Beneficiaries	85.28	74.20	87.61	86.49	85.66	91.79	88.09
	0.41	1.59	0.93	0.77	0.70	1.54	1.40
Race/Ethnicity							
White non-Hispanic	85.72	76.28	86.64	86.66	85.67	91.84	88.70
	0.45	1.94	1.42	0.77	0.76	1.61	1.49
Black non-Hispanic	82.03	70.61	88.03	78.91	85.01	90.27	85.90
	1.29	2.64	1.68	5.43	2.85	5.96	6.77
Hispanic	86.07	74.74	89.63	89.64	87.59	93.05	84.13
	1.53	3.38	1.86	3.99	2.91	7.47	6.52
Other	79.96	51.40	86.53	88.28	81.74	91.26	89.10
	3.20	9.86	4.36	7.36	8.13	11.85	6.07
ncome							
Less than \$2,500	78.91	66.40	93.78	66.35	85.00	100.00	90.72
	2.92	7.73	2.91	6.35	5.20	0.00	7.33
\$2,500 - \$4,999	85.00	81.43	84.53	88.04	78.95	100.00	94.94
	2.06	5.97	3.08	3.73	6.99	0.00	5.14
\$5,000 - \$7,499	84.23	71.07	87.27	85.82	86.39	90.99	86.19
	0.99	2.99	1.33	2.78	4.45	11.03	6.56
\$7,500 - \$9,999	85.39	78.97	90.55	86.76	83.67	81.11	86.75
	0.98	2.67	1.93	2.03	2.78	7.95	3.07
\$10,000 - \$14,999	85.41	72.75	92.56	87.36	86.61	86.38	91.57
	0.95	2.76	1.71	1.40	1.37	3.78	2.20
\$15,000 - \$19,999	86.00	77.68	67.53	86.80	86.90	95.88	84.47
	0.97	4.52	20.09	1.53	1.50	2.96	3.49
\$20,000 - \$24,999	87.93	77.46	70.40	87.35	89.12	95.73	89.25
	1.20	4.79	14.00	2.25	1.50	2.14	4.04
\$25,000 - \$29,999	83.88	52.96	100.00	90.84	81.94	95.06	85.90
	1.98	11.13	0.00	2.84	3.13	2.84	4.94
\$30,000 or more	85.11	79.72	42.96	85.29	84.62	91.37	87.95
	0.85	5.07	14.95	1.80	1.25	2.74	3.09

Table 3.5 Prescription Medicine User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (3 of 4)

		Medicare		Suppleme	ntal Health Insurance		
Beneficiary Characteristic	Total	Fee-for-Service Only	Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	Medicare HMO ²
			Perce	nt of Beneficiaries with at Leas	st One Prescribed Medicine		
All Beneficiaries	85.28	74.20	87.61	86.49	85.66	91.79	88.09
	0.41	1.59	0.93	0.77	0.70	1.54	1.40
Health Status							
Excellent	73.86	52.13	70.93	73.14	77.76	80.58	81.50
	1.16	4.86	3.50	1.86	2.02	5.05	3.37
Very good	81.98	74.00	77.16	86.23	79.82	91.24	84.09
	0.95	2.87	2.98	1.70	1.46	2.89	2.59
Good	87.25	73.85	87.07	87.92	89.19	95.32	91.57
	0.62	2.65	1.67	1.25	1.09	1.71	1.97
Fair	93.38	82.54	94.62	96.06	94.81	97.40	95.64
	0.57	2.28	1.51	0.98	1.04	1.71	1.72
Poor	92.44	82.46	92.27	95.63	95.56	98.05	100.00
	0.87	3.15	1.79	1.54	1.36	2.08	0.00
Functional Limitation							
None	81.25	66.25	80.95	82.67	82.28	90.83	84.91
	0.61	2.49	1.89	1.18	1.01	1.92	2.00
IADL only ⁴	89.57	78.83	89.66	91.76	91.18	91.50	94.10
	0.72	2.52	1.70	1.04	1.33	3.20	1.68
One to two ADLs ⁵	91.59	87.12	92.73	92.89	90.72	96.89	91.74
	0.68	2.72	1.33	1.27	1.62	2.49	2.99
Three to five ADLs	91.84	84.63	92.16	92.67	93.43	93.78	97.54
	0.94	3.11	1.87	2.53	1.72	5.50	2.00

Table 3.5 Prescription Medicine User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (4 of 4)

		Medicare		Suppleme	ntal Health Insurance		
Beneficiary Characteristic	Total	Fee-for-Service Only	Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	Medicare HMO ²
			Perce	ent of Beneficiaries with at Leas	st One Prescribed Medicine		
All Beneficiaries	85.28	74.20	87.61	86.49	85.66	91.79	88.09
	0.41	1.59	0.93	0.77	0.70	1.54	1.40
Metropolitan Area Resident							
Yes	85.50	73.93	88.20	86.23	86.15	91.31	87.82
	0.52	1.87	1.14	1.01	0.81	1.86	1.46
No	84.61	74.61	86.17	86.99	83.80	93.49	92.64
	0.58	2.57	1.57	1.06	1.33	2.23	5.02

Source: Medicare Current Beneficiary Survey, CY 1994 Cost and Use Public-Use File.

¹ The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.

² HMO stands for Health Maintenance Organization.

³ Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of aged and disabled.

⁴ IADL stands for Instrumental Activity of Daily Living.

⁵ ADL stands for Activity of Daily Living.

Table 3.6 Facility User Rates for Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (1 of 4)

		Medicare	Supplem	ental Health Insurance ²
Beneficiary Characteristic	Total ¹	Fee-for-Service Only	Medicaid	Private Insurance
		-		or Long-Term Facility Stay
All Day officials				
All Beneficiaries	8.90 <i>0.27</i>	9.73 <i>0.79</i>	29.32 1.13	3.91 <i>0.20</i>
	0.27	0.79	1.13	0.20
Medicare Status ³ Aged				
65 - 74 years	3.02	3.97	15.30	1.17
	0.28	1.07	1.66	0.22
75 - 84 years	10.56	13.17	37.41	5.44
	0.51	1.77	2.10	0.39
85 years and older	33.71	40.96	61.72	18.18
	1.14	3.03	2.52	1.19
Disabled				
Under 45 years	10.46	6.24	14.82	0.66
	0.93	1.70	1.52	0.70
45 - 64 years	7.86	3.21	19.52	1.30
	0.78	1.35	2.21	0.50
Gender				
Male	6.68	6.85	24.07	3.21
	0.36	0.90	1.59	0.32
Female	10.59	13.30	32.23	4.43
	0.32	1.43	1.26	0.25
Marital Status				
Married	3.70	5.22	18.67	2.27
	0.22	0.91	1.84	0.21
Widowed	15.51	17.75	38.15	7.27
	0.60	1.67	1.87	0.48
Divorced/separated	8.42	3.82	16.35	4.82
,	0.77	1.21	1.59	1.00
Never married	21.79	17.22	35.37	6.51
	1.34	2.80	2.35	1.45

Table 3.6 Facility User Rates for Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (2 of 4)

		Medicare	Supplem	ental Health Insurance ²
Beneficiary Characteristic	Total ¹	Fee-for-Service Only	Medicaid	Private Insurance
	Percent of B	Seneficiaries with at I	_east One Short-	or Long-Term Facility Stay
All Beneficiaries	8.90	9.73	29.32	3.91
	0.27	0.79	1.13	0.20
Race/Ethnicity				
White non-Hispanic	9.28	12.54	40.29	4.00
·	0.30	1.06	1.43	0.21
Black non-Hispanic	7.80	2.67	16.41	2.04
	0.75	1.11	1.55	1.02
Hispanic	3.91	2.61	5.53	3.45
	0.80	0.80	1.29	1.37
Other	8.69	4.83	15.25	4.13
	1.67	1.72	3.56	2.17
Income				
Less than \$2,500	12.23	9.20	27.43	8.15
2000 παιτ φ2,000	1.77	3.58	4.10	2.44
\$2,500 - \$4,999	13.99	13.03	23.28	3.94
+- , + -,	1.72	4.90	2.98	1.52
\$5,000 - \$7,499	19.46	6.32	27.83	5.25
. , . ,	1.03	1.66	1.52	0.99
\$7,500 - \$9,999	12.56	9.48	30.51	6.02
	0.85	1.49	2.67	0.84
\$10,000 - \$14,999	8.29	10.13	29.32	5.20
	0.63	1.74	3.24	0.54
\$15,000 - \$19,999	6.58	12.45	62.12	4.20
	0.59	2.37	9.21	0.60
\$20,000 - \$24,999	4.59	8.31	57.02	2.92
	0.60	2.42	9.62	0.57
\$25,000 - \$29,999	3.45	6.08	30.11	3.14
	0.61	2.62	14.59	0.68
\$30,000 or more	3.30	15.22	42.01	2.26
	0.35	3.68	11.00	0.33

Table 3.6 Facility User Rates for Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (3 of 4)

		Medicare	Supplem	ental Health Insurance ²
Beneficiary Characteristic	Total ¹	Fee-for-Service Only	Medicaid	Private Insurance
	Percent of B	Beneficiaries with at I	Least One Short-	or Long-Term Facility Stay
All Beneficiaries	8.90	9.73	29.32	3.91
	0.27	0.79	1.13	0.20
Health Status				
Excellent	2.89	1.38	21.57	1.28
	0.36	0.75	2.88	0.34
Very good	4.60	4.01	24.86	2.46
	0.33	0.87	2.47	0.29
Good	7.69	8.95	26.87	3.40
	0.48	1.28	1.70	0.32
Fair	16.24	14.89	33.91	7.61
	0.71	1.83	1.71	0.65
Poor	18.73	17.17	31.27	10.57
	1.09	2.74	2.73	1.56
Functional Limitation				
None	0.82	0.67	1.59	0.82
	0.13	0.40	0.53	0.16
IADL only ⁴	4.68	2.88	12.04	2.91
	0.42	0.70	1.39	0.42
One to two ADLs ⁵	13.52	13.17	28.49	7.82
	1.06	2.28	2.56	0.93
Three to five ADLs	46.59	46.71	67.17	25.46
	1.44	3.37	1.92	1.94

Table 3.6 Facility User Rates for Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1994 (4 of 4)

	Medicare	Supplem	ental Health Insurance ²
Total ¹	Only	Medicaid	Private Insurance
Percent of B	eneficiaries with at I	Least One Short-	or Long-Term Facility Stay
8.90	9.73	29.32	3.91
0.27	0.79	1.13	0.20
8.85	10.15	29.79	4.09
0.30	1.03	1.22	0.24
9.07	8.85	28.31	3.43
0.53	1.02	2.12	0.34
	8.85 0.30 9.07	Fee-for-Service Only	Total¹ Fee-for-Service Medicaid Percent of Beneficiaries with at Least One Short-8.90 9.73 29.32 0.27 0.79 1.13 8.85 10.15 29.79 0.30 1.03 1.22 9.07 8.85 28.31

Source: Medicare Current Beneficiary Survey, CY 1994 Cost and Use Public-Use File.

- The 8.90 percent of Medicare beneficiaries with a facility stay differs from the 7.23 percent of Medicare beneficiaries who either resided full-year in a long-term care facility or part of the year in a long-term care facility, as shown in Table 1.1. User rates in this table include full-year community residents who had short-term facility stays (institutional events), primarily in skilled nursing facilities, which were reported either during a community interview or created through Medicare claims data. The residence rates in Table 1.1 do not count such people as residing full- or part-year in a long-term care facility.
- 2 Beneficiaries enrolled in Medicare HMOs are not included in individual categories in the table, but are included in the total. Beneficiaries who were not eligible for Medicaid at any time during 1994, but who had individually purchased private insurance, employer-sponsored private insurance, unknown purchaser for private insurance, or who were enrolled in a private HMO are included in the category *Private Insurance*.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of aged and disabled.
- 4 IADL stands for Instrumental Activity of Daily Living.
- 5 ADL stands for Activity of Daily Living.